

**JUDICIAL CANDIDATE / OFFICEHOLDER
CAMPAIGN FINANCE REPORT**

**FORM JC/OH
COVER SHEET PG 1**

| | | | | | | |
|---|--|-----|--|--|-----|------|
| The JC/OH Instruction Guide explains how to complete this form. | | | 1 Filer ID (Ethics Commission Filers) 00089660 | 2 Total pages filed: 14 | | |
| 3 CANDIDATE / OFFICEHOLDER NAME | MS / MRS / MR FIRST Leslie S. NICKNAME LAST Barrows | | | MI OFFICE USE ONLY | | |
| | | | | Date Received ELECTRONICALLY FILED 02/02/2026 | | |
| 4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address | ADDRESS / PO BOX; APT / SUITE #; CITY; 520 E. Southlake Blvd. Ste. 140 Southlake , TX 76092 | | | ZIP CODE Date Hand-delivered or Date Postmarked | | |
| | | | | Receipt # <input type="text"/> Amount <input type="text"/> | | |
| | | | | Date Processed | | |
| | | | | Date Imaged | | |
| 5 CAMPAIGN TREASURER NAME | MS / MRS / MR FIRST Jeffrey NICKNAME LAST Sanford | | | MI SUFFIX | | |
| | | | | | | |
| 6 CAMPAIGN TREASURER ADDRESS (Residence or Business) | STREET ADDRESS (NO PO BOX PLEASE); 2317 Plaza Parkway Ste. 300 Bedford , TX 76021 | | | APT / SUITE #; CITY; STATE; ZIP CODE | | |
| 7 CAMPAIGN TREASURER PHONE | AREA CODE PHONE NUMBER EXTENSION (817) 691-7119 | | | | | |
| 8 REPORT TYPE | <input type="checkbox"/> January 15 <input checked="" type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only) <input type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded modified reporting limit <input type="checkbox"/> Final Report (Attach C/OH-FR) | | | | | |
| 9 PERIOD COVERED | Month 01/01/2026 | Day | Year | Month 01/22/2026 | Day | Year |
| 10 ELECTION | ELECTION DATE Month 03/03/2026 | | Day | ELECTION TYPE <input checked="" type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other <input type="checkbox"/> General <input type="checkbox"/> Special | | |
| 11 OFFICE | OFFICE HELD (if any) | | | 12 OFFICE SOUGHT (if known) District Judge District 231 | | |

GO TO PAGE 2

**JUDICIAL CANDIDATE / OFFICEHOLDER REPORT:
SUPPORT & TOTALS**

**FORM JC/OH
COVER SHEET PG 2**

2 of 14

| | | | | | | | | | | | | | | | |
|--|---|--|---|---|----------------|----------------|--|----------------------------------|-------------------|--|-----------------------------------|-----------------------------------|--|--|--------------------------------------|
| 13 C / OH NAME | Barrows , Leslie S. | | 14 Filer ID (Ethics Commission Filers) 00089660 | | | | | | | | | | | | |
| 15 NOTICE FROM POLITICAL COMMITTEE(S) | <p>This box is for notice of political contributions accepted or political expenditures made by political committees to support the candidate / officeholder. <i>These expenditures may have been made without the candidate's or officeholder's knowledge or consent.</i> Candidates and officeholders are required to report this information only if they receive notice of such expenditures.</p> <table border="1"> <tr> <td><input type="checkbox"/> Additional Pages</td> <td>COMMITTEE TYPE</td> <td>COMMITTEE NAME</td> </tr> <tr> <td></td> <td><input type="checkbox"/> GENERAL</td> <td>COMMITTEE ADDRESS</td> </tr> <tr> <td></td> <td><input type="checkbox"/> SPECIFIC</td> <td>COMMITTEE CAMPAIGN TREASURER NAME</td> </tr> <tr> <td></td> <td></td> <td>COMMITTEE CAMPAIGN TREASURER ADDRESS</td> </tr> </table> | | | <input type="checkbox"/> Additional Pages | COMMITTEE TYPE | COMMITTEE NAME | | <input type="checkbox"/> GENERAL | COMMITTEE ADDRESS | | <input type="checkbox"/> SPECIFIC | COMMITTEE CAMPAIGN TREASURER NAME | | | COMMITTEE CAMPAIGN TREASURER ADDRESS |
| <input type="checkbox"/> Additional Pages | COMMITTEE TYPE | COMMITTEE NAME | | | | | | | | | | | | | |
| | <input type="checkbox"/> GENERAL | COMMITTEE ADDRESS | | | | | | | | | | | | | |
| | <input type="checkbox"/> SPECIFIC | COMMITTEE CAMPAIGN TREASURER NAME | | | | | | | | | | | | | |
| | | COMMITTEE CAMPAIGN TREASURER ADDRESS | | | | | | | | | | | | | |
| 16 CONTRIBUTION TOTALS | 1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS(OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY) | | \$ 0.00 | | | | | | | | | | | | |
| | 2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) | | \$ 10,300.00 | | | | | | | | | | | | |
| EXPENDITURE TOTALS | 3. TOTAL UNITEMIZED POLITICAL EXPENDITURES | | \$ 0.00 | | | | | | | | | | | | |
| | 4. TOTAL POLITICAL EXPENDITURES | | \$ 16,644.36 | | | | | | | | | | | | |
| CONTRIBUTION BALANCE | 5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD | | \$ 17,222.98 | | | | | | | | | | | | |
| OUTSTANDING LOAN TOTALS | 6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD | | \$ 35,959.00 | | | | | | | | | | | | |
| 17 AFFIDAVIT | | | | | | | | | | | | | | | |
| <p>I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.</p> <p style="text-align: right;">Leslie S. Barrows</p> <hr/> <p style="text-align: right;">Signature of Candidate or Officeholder</p> | | | | | | | | | | | | | | | |
| AFFIX NOTARY STAMP / SEAL ABOVE | | | | | | | | | | | | | | | |
| <p>Sworn to and subscribed before me, by the said _____, this the _____ day of _____, 20_____, to certify which, witness my hand and seal of office.</p> | | | | | | | | | | | | | | | |
| Signature of officer administering oath | | Printed name of officer administering oath | | | | | | | | | | | | | |
| | | Title of officer administering oath | | | | | | | | | | | | | |

SUBTOTALS - JC/OH**FORM JC/OH
COVER SHEET PG 3**

3 of 14

| | |
|--|--|
| 18 FILER NAME Barrows , Leslie S. | 19 Filer ID (Ethics Commission Filers) 00089660 |
| 20 SCHEDULE SUBTOTALS NAME OF SCHEDULE | |
| 1. <input checked="" type="checkbox"/> SCHEDULE A(J): MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL) \$ 10,300.00 | |
| 2. <input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS \$ | |
| 3. <input type="checkbox"/> SCHEDULE B(J): PLEDGED CONTRIBUTIONS (JUDICIAL) \$ | |
| 4. <input type="checkbox"/> SCHEDULE E(J): LOANS (JUDICIAL) \$ | |
| 5. <input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS \$ 16,644.36 | |
| 6. <input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS \$ | |
| 7. <input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS \$ | |
| 8. <input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD \$ | |
| 9. <input type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS \$ | |
| 10. <input type="checkbox"/> SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH \$ | |
| 11. <input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS \$ | |
| 12. <input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER \$ | |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

| | | | |
|---|---|---|---|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A(J)1: Sch: 1/5 Rpt: 4/14 | |
| 2 FILER NAME Barrows , Leslie S. | | 3 Filer ID (Ethics Commission Filers) 00089660 | |
| 4 Date 01/02/2026 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bravo, Jeremy 6 Contributor address; City; State; Zip Code Fort Worth, TX 76107 | 7 Amount of Contribution (\$) \$100.00 | |
| 8 Contributor's Principal Occupation Realtor | | 9 Contributor's Job Title None | |
| 10 Contributor's employer/law firm Sothebys Realty | | 11 Law firm of contributor's spouse (if any) | |
| 12 If contributor is a child, law firm of parent(s) (if any) | | | |
| Date 01/14/2026 | | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bruning, Rebecca Contributor address; City; State; Zip Code Southlake, TX 76092 | Amount of Contribution (\$) \$250.00 |
| Contributor's Principal Occupation Interior Designer | | Contributor's Job Title None | |
| Contributor's employer/law firm Bruning Interiors | | Law firm of contributor's spouse (if any) | |
| If contributor is a child, law firm of parent(s) (if any) | | | |
| Date 01/05/2026 | | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cutrer, Anita Contributor address; City; State; Zip Code North Richland Hills, TX 76180 | Amount of Contribution (\$) \$1,500.00 |
| Contributor's Principal Occupation Attorney | | Contributor's Job Title None | |
| Contributor's employer/law firm Cutrer Law Group | | Law firm of contributor's spouse (if any) | |
| If contributor is a child, law firm of parent(s) (if any) Barrows Firm | | | |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

| | | |
|---|--|--|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A(J)1: Sch: 2/5 Rpt: 5/14 |
| 2 FILER NAME Barrows , Leslie S. | | 3 Filer ID (Ethics Commission Filers) 00089660 |
| 4 Date 01/17/2026 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gunter, Lora | 7 Amount of Contribution (\$) \$200.00 |
| | 6 Contributor address; City; State; Zip Code Southlake, TX 76092 | |
| 8 Contributor's Principal Occupation Vice President | | 9 Contributor's Job Title None |
| 10 Contributor's employer/law firm LJA Engineering | | 11 Law firm of contributor's spouse (if any) |
| 12 If contributor is a child, law firm of parent(s) (if any) | | |
| Date 01/13/2026 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hastings, Steven | Amount of Contribution (\$) \$1,000.00 |
| | Contributor address; City; State; Zip Code Lakewood Village, TX 75068 | |
| Contributor's Principal Occupation CPA | | Contributor's Job Title None |
| Contributor's employer/law firm ValueScope | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |
| Date 01/11/2026 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hoffmans, Anne | Amount of Contribution (\$) \$50.00 |
| | Contributor address; City; State; Zip Code Southlake, TX 76092 | |
| Contributor's Principal Occupation Homemaker | | Contributor's Job Title None |
| Contributor's employer/law firm Homemaker | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

| | | |
|---|--|---|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A(J)1: Sch: 3/5 Rpt: 6/14 |
| 2 FILER NAME Barrows , Leslie S. | | 3 Filer ID (Ethics Commission Filers) 00089660 |
| 4 Date 01/06/2026 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mitchell, Rick | 7 Amount of Contribution (\$) \$1,000.00 |
| | 6 Contributor address; City; State; Zip Code Southlake, TX 76092 | |
| 8 Contributor's Principal Occupation Attorney | | 9 Contributor's Job Title None |
| 10 Contributor's employer/law firm Rick Mitchell Law | | 11 Law firm of contributor's spouse (if any) |
| 12 If contributor is a child, law firm of parent(s) (if any) | | |
| Date 01/13/2026 | | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Powell, Lauren |
| | | Contributor address; City; State; Zip Code Grapevine, TX 76051 |
| Contributor's Principal Occupation Lawyer | | Contributor's Job Title None |
| Contributor's employer/law firm Self-Employed | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |
| Date 01/11/2026 | | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schock, Rhonda |
| | | Contributor address; City; State; Zip Code Keller, TX 76248 |
| Contributor's Principal Occupation Professional Organizer | | Contributor's Job Title None |
| Contributor's employer/law firm Self-Employed | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

| | | | |
|---|---|---|---|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A(J)1: Sch: 4/5 Rpt: 7/14 | |
| 2 FILER NAME Barrows , Leslie S. | | 3 Filer ID (Ethics Commission Filers) 00089660 | |
| 4 Date 01/13/2026 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Seroka, Caroline 6 Contributor address; City; State; Zip Code Grapevine, TX 76051 | 7 Amount of Contribution (\$) \$300.00 | |
| 8 Contributor's Principal Occupation Retired | | 9 Contributor's Job Title None | |
| 10 Contributor's employer/law firm Retired | | 11 Law firm of contributor's spouse (if any) | |
| 12 If contributor is a child, law firm of parent(s) (if any) | | | |
| Date 01/19/2026 | | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thane, Libby Contributor address; City; State; Zip Code Southlake, TX 76092 | Amount of Contribution (\$) \$150.00 |
| Contributor's Principal Occupation Financial Advisor | | Contributor's Job Title None | |
| Contributor's employer/law firm Self-Employed | | Law firm of contributor's spouse (if any) | |
| If contributor is a child, law firm of parent(s) (if any) | | | |
| Date 01/13/2026 | | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VS PAC Contributor address; City; State; Zip Code Fort Worth, TX 76102 | Amount of Contribution (\$) \$5,000.00 |
| Contributor's Principal Occupation | | Contributor's Job Title | |
| Contributor's employer/law firm | | Law firm of contributor's spouse (if any) | |
| If contributor is a child, law firm of parent(s) (if any) | | | |

MONETARY POLITICAL CONTRIBUTIONS**SCHEDULE A(J)1**

| | | |
|---|--|--|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A(J)1: Sch: 5/5 Rpt: 8/14 |
| 2 FILER NAME Barrows , Leslie S. | | 3 Filer ID (Ethics Commission Filers) 00089660 |
| 4 Date 01/08/2026 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Walker, Sue 6 Contributor address; City; State; Zip Code Arlington, TX 76016 | 7 Amount of Contribution (\$) \$200.00 |
| 8 Contributor's Principal Occupation Retired | | 9 Contributor's Job Title Paralegal |
| 10 Contributor's employer/law firm Retired | | 11 Law firm of contributor's spouse (if any) |
| 12 If contributor is a child, law firm of parent(s) (if any) | | |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

| | | | |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense | Event Expense | Loan Repayment/Reimbursement | Solicitation/Fundraising Expense |
| Accounting/Banking | Fees | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense | Food/Beverage Expense | Polling Expense | Travel in District |
| Contributions/ Donations Made By - Candidate/Officeholder/Political Committee | Gift/Awards/Memorials Expense | Printing Expense | Travel Out of District |
| Credit Card Payment | Legal Services | Salaries/Wages/Contract Labor | OTHER (enter a category not listed above) |

The Instruction Guide explains how to complete this form.

| | | |
|---|--|---|
| 1 Total pages Schedule F1: Sch: 1/6 Rpt: 9/14 | 2 FILER NAME Barrows , Leslie S. | 3 Filer ID (Ethics Commission Filers) 00089660 |
| 4 Date 01/02/2026 | 5 Payee name Anedot, Inc. | |
| 6 Amount (\$) \$4.30 | 7 Payee address; City; State; Zip Code 1340 Poydras Street, Suite 1770 New Orleans, LA 70112 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Fees | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fundraising Platform Fee |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name Anedot, Inc. | Office sought Office held |
| Date 01/05/2026 | Payee name Anedot, Inc. | |
| Amount (\$) \$60.30 | Payee address; City; State; Zip Code 1340 Poydras Street, Suite 1770 New Orleans, LA 70112 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Fees | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fundraising Platform Fee |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name Anedot, Inc. | Office sought Office held |
| Date 01/06/2026 | Payee name Anedot, Inc. | |
| Amount (\$) \$40.30 | Payee address; City; State; Zip Code 1340 Poydras Street, Suite 1770 New Orleans, LA 70112 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Fees | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fundraising Platform Fee |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name Anedot, Inc. | Office sought Office held |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

| | | | |
|---|-------------------------------|--------------------------------|--|
| Advertising Expense | Event Expense | Loan Repayment/Reimbursement | Solicitation/Fundraising Expense |
| Accounting/Banking | Fees | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense | Food/Beverage Expense | Polling Expense | Travel in District |
| Contributions/ Donations Made By - Candidate/Officeholder/Political Committee | Gift/Awards/Memorials Expense | Printing Expense | Travel Out of District |
| Credit Card Payment | Legal Services | Salaries/Wages/Contract Labor | OTHER (enter a category not listed above) |

The Instruction Guide explains how to complete this form.

| | | |
|---|--|---|
| 1 Total pages Schedule F1: Sch: 2/6 Rpt: 10/14 | 2 FILER NAME Barrows , Leslie S. | 3 Filer ID (Ethics Commission Filers) 00089660 |
| 4 Date 01/08/2026 | 5 Payee name Anedot, Inc. | |
| 6 Amount (\$) \$8.30 | 7 Payee address; City; State; Zip Code 1340 Poydras Street, Suite 1770 New Orleans, LA 70112 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Fees | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fundraising Platform Fee |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name Anedot, Inc. | Office sought Office held |
| Date 01/11/2026 | Payee name Anedot, Inc. | |
| Amount (\$) \$2.30 | Payee address; City; State; Zip Code 1340 Poydras Street, Suite 1770 New Orleans, LA 70112 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Fees | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fundraising Platform Fee |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name Anedot, Inc. | Office sought Office held |
| Date 01/11/2026 | Payee name Anedot, Inc. | |
| Amount (\$) \$2.30 | Payee address; City; State; Zip Code 1340 Poydras Street, Suite 1770 New Orleans, LA 70112 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Fees | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fundraising Platform Fee |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name Anedot, Inc. | Office sought Office held |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

| | | | |
|---|-------------------------------|--------------------------------|--|
| Advertising Expense | Event Expense | Loan Repayment/Reimbursement | Solicitation/Fundraising Expense |
| Accounting/Banking | Fees | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense | Food/Beverage Expense | Polling Expense | Travel in District |
| Contributions/ Donations Made By - Candidate/Officeholder/Political Committee | Gift/Awards/Memorials Expense | Printing Expense | Travel Out of District |
| Credit Card Payment | Legal Services | Salaries/Wages/Contract Labor | OTHER (enter a category not listed above) |

The Instruction Guide explains how to complete this form.

| | | |
|---|--|---|
| 1 Total pages Schedule F1: Sch: 3/6 Rpt: 11/14 | 2 FILER NAME Barrows , Leslie S. | 3 Filer ID (Ethics Commission Filers) 00089660 |
| 4 Date 01/11/2026 | 5 Payee name Anedot, Inc. | |
| 6 Amount (\$) \$20.30 | 7 Payee address; City; State; Zip Code 1340 Poydras Street, Suite 1770 New Orleans, LA 70112 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Fees | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fundraising Platform Fee |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought |
| Date 01/13/2026 | Payee name Anedot, Inc. | |
| Amount (\$) \$40.30 | Payee address; City; State; Zip Code 1340 Poydras Street, Suite 1770 New Orleans, LA 70112 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Fees | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fundraising Platform Fee |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought |
| Date 01/14/2026 | Payee name Anedot, Inc. | |
| Amount (\$) \$10.30 | Payee address; City; State; Zip Code 1340 Poydras Street, Suite 1770 New Orleans, LA 70112 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Fees | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fundraising Platform Fee |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

| | | | |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense | Event Expense | Loan Repayment/Reimbursement | Solicitation/Fundraising Expense |
| Accounting/Banking | Fees | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense | Food/Beverage Expense | Polling Expense | Travel in District |
| Contributions/ Donations Made By - Candidate/Officeholder/Political Committee | Gift/Awards/Memorials Expense | Printing Expense | Travel Out of District |
| Credit Card Payment | Legal Services | Salaries/Wages/Contract Labor | OTHER (enter a category not listed above) |

The Instruction Guide explains how to complete this form.

| | | |
|---|--|---|
| 1 Total pages Schedule F1: Sch: 4/6 Rpt: 12/14 | 2 FILER NAME Barrows , Leslie S. | 3 Filer ID (Ethics Commission Filers) 00089660 |
| 4 Date 01/17/2026 | 5 Payee name Anedot, Inc. | |
| 6 Amount (\$) \$8.30 | 7 Payee address; City; State; Zip Code 1340 Poydras Street, Suite 1770 New Orleans, LA 70112 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Fees | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fundraising Platform Fee |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name Anedot, Inc. | Office sought Office held |
| Date 01/19/2026 | Payee name Anedot, Inc. | |
| Amount (\$) \$6.30 | Payee address; City; State; Zip Code 1340 Poydras Street, Suite 1770 New Orleans, LA 70112 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Fees | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fundraising Platform Fee |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name Arlington Today | Office sought Office held |
| Date 01/22/2026 | Payee name Arlington Today | |
| Amount (\$) \$800.00 | Payee address; City; State; Zip Code 1000 Ballpark Way #308 Arlington, TX 76011 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Advertising Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Advertising |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

| | | | |
|---|-------------------------------|--------------------------------|--|
| Advertising Expense | Event Expense | Loan Repayment/Reimbursement | Solicitation/Fundraising Expense |
| Accounting/Banking | Fees | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense | Food/Beverage Expense | Polling Expense | Travel in District |
| Contributions/ Donations Made By - Candidate/Officeholder/Political Committee | Gift/Awards/Memorials Expense | Printing Expense | Travel Out of District |
| Credit Card Payment | Legal Services | Salaries/Wages/Contract Labor | OTHER (enter a category not listed above) |

The Instruction Guide explains how to complete this form.

| | | |
|---|---|--|
| 1 Total pages Schedule F1: Sch: 5/6 Rpt: 13/14 | 2 FILER NAME Barrows , Leslie S. | 3 Filer ID (Ethics Commission Filers) 00089660 |
| 4 Date 01/16/2026 | 5 Payee name Campaign Verify | |
| 6 Amount (\$) \$95.00 | 7 Payee address; City; 1215 31st Street NW Washington, DC 20007 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Advertising Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Verification for Texting |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name Office sought | Office held |
| Date 01/20/2026 | Payee name Delongchamp, Francine | |
| Amount (\$) \$1,546.06 | Payee address; City; 6957 Shoreview Drive Grand Prairie, TX 75054 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Door Knocking |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name Office sought | Office held |
| Date 01/20/2026 | Payee name Delongchamp, Francine | |
| Amount (\$) \$4,000.00 | Payee address; City; 6957 Shoreview Drive Grand Prairie, TX 75054 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Door Knocking |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name Office sought | Office held |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

| | | | |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense | Event Expense | Loan Repayment/Reimbursement | Solicitation/Fundraising Expense |
| Accounting/Banking | Fees | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense | Food/Beverage Expense | Polling Expense | Travel in District |
| Contributions/ Donations Made By - Candidate/Officeholder/Political Committee | Gift/Awards/Memorials Expense | Printing Expense | Travel Out of District |
| Credit Card Payment | Legal Services | Salaries/Wages/Contract Labor | OTHER (enter a category not listed above) |

The Instruction Guide explains how to complete this form.

| | | |
|--|---|---|
| 1 Total pages Schedule F1: Sch: 6/6 Rpt: 14/14 | 2 FILER NAME Barrows , Leslie S. | 3 Filer ID (Ethics Commission Filers) 00089660 |
| 4 Date 01/22/2026 | 5 Payee name Install Connect | |
| 6 Amount (\$) \$5,000.00 | 7 Payee address; City; 505 W State St Garland, TX 75040 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Sign Install Labor |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name Office sought | Office held |
| Date 01/14/2026 | Payee name Peerly | |
| Amount (\$) \$500.00 | Payee address; City; 2232 Dell Range Blvd #287 Cheyenne, WY 82009 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Advertising Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Texting |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name Office sought | Office held |
| Date 01/16/2026 | Payee name Texas Trade Graphics | |
| Amount (\$) \$4,500.00 | Payee address; City; 2935 Irving #201 Dallas, TX 75247 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Advertising Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense 100 - 48x96 inch Signs |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name Office sought | Office held |